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02/26/2004

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CAMILLE PAYNE

(Depositor's name)

(Signature)

April 6, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/992,577	11/14/2001	Greg B. Blander	13558-5	9892

TITLE OF INVENTION: DIGITAL TIMEPIECE WITH APPROXIMATE TIME MESSAGING

APPL. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$300	\$965	05/26/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GOODWIN, JEANNE M	2841	368-082000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. \_\_\_\_\_  
2. \_\_\_\_\_  
3. \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Genuine Ideas, LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

120 Woodland Avenue  
Summit, New Jersey 07901Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee☒ Advance Order - # of Copies 10

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☐ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 501358 (enclose an extra copy of this form).

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04/08/2004 AWONDAF2 00000015 501358 09992577

01 FC:2501	665.00 DA
02 FC:1504	300.00 DA
03 FC:8001	30.00 DA

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PTOL-85 (Rev. 11/03) Approved for use through 04/30/2004.

OMB 0651-0033

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**FACSIMILE COVER SHEET**

**FROM: Alex R. Pagano, Reg. No. 44,994**  
**Re: U.S. Patent No. 09/992,577**

**Date April 7, 2004**

**TEL: 973.597.6202 FAX: 973.597.2400**

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**TO: Mail Stop: ISSUE FEE**  
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- (1) Part B - Fee(s) Transmittal (1 sheet);**
- (2) This fax cover (1 sheet).**

**TOTAL PAGES (WITH COVER) 2**

**CLIENT ID/MATTER #: 13558-5**

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